

National Healthcare Agreement: PI 03– Prevalence of overweight and obesity, 2021

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Progress measure
Short name:	PI 03–Prevalence of overweight and obesity, 2021
METEOR identifier:	725824
Registration status:	<ul style="list-style-type: none">• Health, Standard 03/07/2020
Description:	Prevalence of overweight and obesity in adults and children.
Indicator set:	National Healthcare Agreement (2021) Health , Standard 19/11/2020
Outcome area:	Prevention Health , Standard 07/07/2010

Collection and usage attributes

Computation description: Body Mass Index (BMI) is calculated as weight (in kilograms) divided by the square of height (in metres).

For adults, underweight is defined as a BMI less than 18.5, normal is defined as a BMI of 18.5 to less than 25.0, overweight is defined as a BMI of 25.0 to less than 30.0 and obese is defined as a BMI of greater than or equal to 30.0.

For children, underweight is defined as a BMI (appropriate for age and sex) that is likely to be less than 18.5 at age 18, normal is defined as a BMI (appropriate for age and sex) that is likely to be 18.5 to less than 25.0 at age 18, overweight is defined as a BMI (appropriate for age and sex) that is likely to be 25.0 to less than 30.0 at age 18 and obese is defined as a BMI (appropriate for age and sex) that is likely to be greater than or equal to 30.0 at age 18, based on centile curves. See [Appendix 4: Classification of BMI for children in Australian Health Survey: Users' Guide, 2017–18](#) (ABS cat. no. 4363.0.55.001) (ABS 2019c) for BMI values.

Rates are directly age-standardised to the 2001 Australian population.

Excludes pregnant women where identified. For people who did not have their height or weight measured, height and weight were imputed (see comments below for more details).

Analysis by remoteness and Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) is based on usual residence of person.

Presented as a percentage.

95% confidence intervals and relative standard errors calculated for rates.

Computation: $100 \times (\text{Numerator} \div \text{Denominator})$

Calculated separately for adults and children.

Numerator: Adults: Number of persons aged 18 and over who are overweight or obese.

Children: Number of persons aged 5–17 who are overweight or obese.

Numerator data elements:

Data Element / Data Set

Data Element

Adult—Body Mass Index

Data Source

[ABS 2017–18 National Health Survey \(NHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Child—Body Mass Index

Data Source

[ABS 2017–18 National Health Survey \(NHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Adult—Body Mass Index

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey \(NATSIHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Child—Body Mass Index

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey \(NATSIHS\)](#)

Guide for use

Data source type: Survey

Denominator:

Adults: Population aged 18 and over

Children: Population aged 5–17

Denominator data elements:

Data Element / Data Set

Data Element

Person—age

Data Source

[ABS 2017–18 National Health Survey \(NHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—age

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey \(NATSIHS\)](#)

Guide for use

Data source type: Survey

Disaggregation:

For each of adults and children, state and territory, by:

- sex by age (adults only) (not reported)
- Indigenous status
- remoteness (Australian Statistical Geography Standard (ASGS) 2016 Remoteness Structure)
- 2016 Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socio-Economic Disadvantage (IRSD) quintiles (not reported)
- BMI category (underweight, normal, overweight, obese)
- disability status (not reported)

For adults, nationally, by (all not reported):

- sex by remoteness (ASGS 2016 Remoteness Structure)
- 2016 SEIFA IRSD deciles
- remoteness (ASGS 2016 Remoteness Structure) by 2016 SEIFA IRSD deciles.

Some disaggregation may result in numbers too small for publication.

Disaggregation data elements:

Data Element / Data Set

Data Element

Person—age

Data Source

[ABS 2017–18 National Health Survey \(NHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—area of usual residence

Data Source

[ABS 2017–18 National Health Survey \(NHS\)](#)

Guide for use

Data source type: Survey
Used for disaggregation by state/territory, remoteness and SEIFA of residence

Data Element / Data Set

Data Element

Person—disability status

Data Source

[ABS 2017–18 National Health Survey \(NHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—Indigenous status

Data Source

[ABS 2017–18 National Health Survey \(NHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—sex

Data Source

[ABS 2017–18 National Health Survey \(NHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—age

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey \(NATSIHS\)](#)

Guide for use

Data source type: Survey

Data Element / Data Set

Data Element

Person—area of usual residence

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey \(NATSIHS\)](#)

Guide for use

Data source type: Survey
Used for disaggregation by state/territory, remoteness and SEIFA of residence

Comments:

Most recent data available for 2021 National Healthcare Agreement performance reporting: 2017–18 (total population, non-Indigenous: NHS); 2018–19 (Indigenous only: NATSIHS).

NO NEW DATA FOR 2021 REPORTING.

Data are based on measured height and weight, though respondents were also asked to self-report their height and weight. BMI derived from measured height and weight is preferable to that derived from self-reported height and weight.

In the 2017–18 NHS, 33.8% of respondents aged 18 years and over did not have their height or weight measured. For these people, height and weight were imputed using a range of information including their self-reported height and weight. For more information see [Appendix 2: Physical measurements in the 2017–18 National Health Survey in National Health Survey: First results, 2017–18](#) (ABS cat. no. 4364.0.55.001) (ABS 2019b).

In the 2018–19 NATSIHS, 55.8% of respondents aged 18 years and over did not have their height or weight measured. For these people, height and weight were imputed using a range of information including their self-reported height and weight. For more information see [Explanatory notes in the National Aboriginal and Torres Strait Islander Health Survey, 2018–19](#) (ABS cat. no. 4715.0) (ABS 2019a).

Representational attributes

Representation class:	Percentage
Data type:	Real
Unit of measure:	Person
Format:	N[NN].N

Indicator conceptual framework

Framework and dimensions:	Health behaviours
	Bio-medical factors

Data source attributes

Data sources:**Data Source**

[ABS 2017–18 National Health Survey \(NHS\)](#)

Frequency

Every 3 years

Data custodian

Australian Bureau of Statistics

Data Source

[ABS 2018-19 National Aboriginal and Torres Strait Islander Health Survey \(NATSIHS\)](#)

Data custodian

Australian Bureau of Statistics

Accountability attributes

Reporting requirements: National Healthcare Agreement

Organisation responsible for providing data: Australian Bureau of Statistics

Benchmark: [PB d-Better health: by 2018, increase by five percentage points the proportion of Australian adults and children at a healthy body weight, over the 2009 baseline, 2021](#)

Further data development / collection required: Specification: Final, the measure meets the intention of the indicator.

Source and reference attributes

Reference documents: Australian Bureau of Statistics (ABS) 2019a. *National Aboriginal and Torres Strait Islander Health Survey, 2018–19*, ABS cat. no. 4715.0. Canberra: ABS. Viewed 7 May 2030, <https://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4715.0>Main+Features12018-19?OpenDocument>

ABS 2019b. *National Health Survey: First Results, 2017–18*, ABS cat. no. 4364.0.55.001. Canberra: ABS. Viewed 7 May 2020, <https://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4364.0.55.001>Main+Features100192017-18?OpenDocument>

ABS 2019c. *National Health Survey: Users' Guide, 2017–18*, ABS cat. no. 4363.0. Canberra: ABS. Viewed 7 May 2020, <https://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4363.0>Main+Features12017-18?OpenDocument>

Relational attributes

Related metadata references:

Supersedes [National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2020](#)

- [Health](#), Standard 13/03/2020

Has been superseded by [National Healthcare Agreement: PI 03–Prevalence of overweight and obesity, 2022](#)

- [Health](#), Standard 24/09/2021

See also [Australian Health Performance Framework: PI 1.2.1–Rates of current daily smokers, 2019](#)

- [Health](#), Standard 09/04/2020

See also [Australian Health Performance Framework: PI 1.2.3–Levels of risky alcohol consumption, 2019](#)

- [Health](#), Standard 09/04/2020

See also [Australian Health Performance Framework: PI 1.3.1–Prevalence of overweight and obesity, 2019](#)

- [Health](#), Standard 09/04/2020

See also [Australian Health Performance Framework: PI 2.1.6–Potentially avoidable deaths, 2019](#)

- [Health](#), Standard 09/04/2020

See also [National Healthcare Agreement: PB d–Better health: by 2018, increase by five percentage points the proportion of Australian adults and children at a healthy body weight, over the 2009 baseline, 2021](#)

- [Health](#), Standard 03/07/2020

See also [National Healthcare Agreement: PI 04–Rates of current daily smokers, 2021](#)

- [Health](#), Standard 03/07/2020

See also [National Healthcare Agreement: PI 05–Levels of risky alcohol consumption, 2021](#)

- [Health](#), Standard 03/07/2020

See also [National Healthcare Agreement: PI 16–Potentially avoidable deaths, 2021](#)

- [Health](#), Standard 03/07/2020